

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form	1 Filer ID (Ethics Commission filers)	2 Total pages filed:
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3 COMMITTEE NAME	Human Rights Campaign Houston Equal Rights PAC	<b>OFFICE USE ONLY</b>
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of address	ADDRESS / PO BOX      APT/SUITE #      CITY      STATE      ZIP CODE 1640 Rhode Island Ave NW  Washington DC 20036	

5 CAMPAIGN TREASURER NAME	MS/MRS/MR      FIRST      MI James      M. ----- NICKNAME      LAST      SUFFIX Rinefierd	Receipt #	Amount
		Date Processed	
		Date Imaged	

6 CAMPAIGN TREASURER'S STREET ADDRESS Business	STREET ADDRESS (NO PO BOX PLEASE);      APT/SUITE #;      CITY;      STATE;      ZIP CODE 1640 Rhode Island Ave NW  Washington DC 20036
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7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX;      APT/SUITE #;      CITY;      STATE;      ZIP CODE 1640 Rhode Island Ave NW      Washington      DC      20036
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8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE #      EXTENSION (202)      216-1549
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9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination
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10 PERIOD COVERED	Month      Day      Year      Month      Day      Year 9/25/2015      THROUGH      10/24/2015
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11 ELECTION	ELECTION DATE Month      Day      Year 11/3/2015	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
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**GO TO PAGE 2**

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM SPAC  
COVER SHEET PG 2**

12 COMMITTEE NAME PAC	Human Rights Campaign Houston Equal Rights	13 Filer ID (Ethics Commission filers)
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<b>14 COMMITTEE PURPOSE</b> (Attached lists on plain paper to complete this report if necessary)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholder)	<input type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME	
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)  /	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # Prop 1	ELECTION DATE 11/3/2015
		DESCRIPTION Houston Equal Rights Ordinance	

<b>15 CONTRIBUTION TOTALS</b>	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$1,736.00
	2	<b>TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$184,327.98
<b>EXPENDITURE TOTALS</b>	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4	<b>TOTAL POLITICAL EXPENDITURES</b>	\$192,784.00
<b>CONTRIBUTION BALANCE</b>	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0.00
<b>OUTSTANDING LOAN TOTALS</b>	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

James M. Rinefield

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - SPAC****FORM SPAC  
COVER SHEET PG 3**

17 COMMITTEE NAME Human Rights Campaign Houston Equal Rights PAC		18 Filer ID (Ethics Commission filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ \$73,735.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ \$-
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ \$-
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ \$100,000.00
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ \$10,592.98
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATIONS OR LABOR ORGANIZATION	\$ \$-
7.	SCHEDULE E: LOANS	\$ \$-
8.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ \$192,784.00
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ \$-
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ \$-
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ \$-
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ \$-
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ \$-
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ \$-

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

**2 FILER NAME** 3 Filer ID (Ethics Commission filers)

4	Date	5 Full name of contributor Perry G. Pate	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	9/25/2015	6 Contributor address; Dallas TX 75204-7526	City; State; Zip Code	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4	Date	5 Full name of contributor John Affuso	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	9/25/2015	6 Contributor address; Salem MA 02128-2879	City; State; Zip Code	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4	Date	5 Full name of contributor Andrew Z. Linsky	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	9/25/2015	6 Contributor address; Palm Springs CA 92262-2711	City; State; Zip Code	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4	Date	5 Full name of contributor Eva N Neufeld	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	9/25/2015	6 Contributor address; Houston TX 77008-3814	City; State; Zip Code	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4	Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
9/25/2015	Lamar R. Frazier ----- 6 Contributor address;                      City;                      State;                      Zip Code Bellaire                      TX 77401-5115	7	Amount of contributions (\$)  500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lance Martin ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77045-4658	7	Amount of contributions (\$)  100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Randall Hance ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77006-2705	7	Amount of contributions (\$)  500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Shell	
9/25/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cathy Myers ----- 6 Contributor address;                      City;                      State;                      Zip Code Seabrook                      TX 77586-1959	7	Amount of contributions (\$)  100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Ficht	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission filers)	
9/25/2015	6 Contributor address;  College Station	City;  TX	State;  77845-8935	Zip Code  100.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Carl Bedford	out of state PAC(ID# )		7 Amount of contributions (\$)
9/25/2015	6 Contributor address;  Dallas	City;  TX	State;  75233-3304	Zip Code  100.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Larry Braunz	out of state PAC(ID# )		7 Amount of contributions (\$)
9/25/2015	6 Contributor address;  Houston	City;  TX	State;  77006-2005	Zip Code  100.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Patty Ellis	out of state PAC(ID# )		7 Amount of contributions (\$)
9/27/2015	6 Contributor address;  Newtown	City;  PA	State;  18940-9686	Zip Code  250.00
8 Principal occupation / Job title (See Instructions) Retired			9 Employer (See Instructions) Retired	
4 Date	5 Full name of contributor Thomas L. Knabel	out of state PAC(ID# )		7 Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME 3 Filer ID (Ethics Commission filers)

9/27/2015	6 Contributor address; <span style="float: right;">City; State; Zip Code</span>	500.00
	Minneapolis MN 55403-1000	

8 Principal occupation / Job title (See Instructions) Physician Executive	9 Employer (See Instructions) United Health
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9/27/2015	4 Date	5 Full name of contributor Vanessa Benavides	out of state PAC(ID# )	7	Amount of contributions (\$)  250.00
		6 Contributor address; <span style="float: right;">City; State; Zip Code</span>			
		Dallas TX 75219-4136			

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Tenet Healthcare
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9/27/2015	4 Date	5 Full name of contributor Ian Barrett	out of state PAC(ID# )	7	Amount of contributions (\$)  500.00
		6 Contributor address; <span style="float: right;">City; State; Zip Code</span>			
		League City TX 77573-4566			

8 Principal occupation / Job title (See Instructions) HR Executive	9 Employer (See Instructions) UT Medical
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9/28/2015	4 Date	5 Full name of contributor James Thomas	out of state PAC(ID# )	7	Amount of contributions (\$)  100.00
		6 Contributor address; <span style="float: right;">City; State; Zip Code</span>			
		Houston TX 77051-1554			

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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	4 Date	5 Full name of contributor Frank Hoyt Woo	out of state PAC(ID# )	7	Amount of contributions (\$)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1 Total Pages Schedule A1:	
2 FILER NAME			3 Filer ID (Ethics Commission filers)	
9/29/2015	6 Contributor address;	City;	State;	Zip Code
		San Francisco	CA	94127-1850
				250.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Marketing			KEO Marketing	
4 Date	5 Full name of contributor	out of state PAC(ID# )		7 Amount of contributions (\$)
	Sheila A. Kloefkorn			
	6 Contributor address;	City;	State;	Zip Code
9/29/2015		Tempe	AZ	85284-2268
				250.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Marketing			KEO Marketing	
4 Date	5 Full name of contributor	out of state PAC(ID# )		7 Amount of contributions (\$)
	Sheila A. Kloefkorn			
	6 Contributor address;	City;	State;	Zip Code
9/29/2015		Tempe	AZ	85284-2268
				250.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Marketing			KEO Marketing	
4 Date	5 Full name of contributor	out of state PAC(ID# )		7 Amount of contributions (\$)
	Christopher James Carolan			
	6 Contributor address;	City;	State;	Zip Code
9/29/2015		Brooklyn	NY	11217-3387
				250.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Attorney			Seyfarth Shaw	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

**2 FILER NAME** 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Eric D. Johnson	7	Amount of contributions (\$)
9/29/2015	6 Contributor address; City; State; Zip Code Dallas TX 75219-5513		250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Webb	7	Amount of contributions (\$)
9/29/2015	6 Contributor address; City; State; Zip Code Chicago IL 60657-2016		250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Benjamin Waldman	7	Amount of contributions (\$)
9/30/2015	6 Contributor address; City; State; Zip Code Seattle WA 98144-4024		250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James W. Harrison	7	Amount of contributions (\$)
10/1/2015	6 Contributor address; City; State; Zip Code Dallas TX 75219-4406		500.00

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Realpage, Inc.
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/1/2015	Corey B. Smith ----- 6 Contributor address; City; State; Zip Code Minneapolis MN 55427-3105	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Ian Barrett ----- 6 Contributor address; City; State; Zip Code League City TX 77573-4566	7	Amount of contributions (\$)  40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Richard Dean Dickson ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-3537	7	Amount of contributions (\$)  45.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Rey Ocanas ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-7144	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Lou Weaver ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$)  250.00

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-5739	250.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas L. Seymour	7 Amount of contributions (\$)
10/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77008-3912	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert W. Newhart	7 Amount of contributions (\$)
10/3/2015	6 Contributor address; City; State; Zip Code Chicago IL 60613-5837	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sheila A. Kloefkorn	7 Amount of contributions (\$)
10/4/2015	6 Contributor address; City; State; Zip Code Tempe AZ 85284-2268	

8 Principal occupation / Job title (See Instructions) Marketing	9 Employer (See Instructions) KEO Marketing
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lucilo Andres Pena	7	Amount of contributions (\$)
	10/4/2015	6 Contributor address; City; State; Zip Code Dallas TX 75201-2530		500.00
8	Principal occupation / Job title (See Instructions) President-Development		9	Employer (See Instructions) Billingsley Co.
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stanley R. Zanarotti	7	Amount of contributions (\$)
	10/4/2015	6 Contributor address; City; State; Zip Code Cambridge MA 02141-1146		1000.00
8	Principal occupation / Job title (See Instructions) Entrepreneur		9	Employer (See Instructions) Dimensional Insight
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Martin E. Rouse	7	Amount of contributions (\$)
	10/5/2015	6 Contributor address; City; State; Zip Code Cabin John MD 20818-1003		1000.00
8	Principal occupation / Job title (See Instructions) National Field Director		9	Employer (See Instructions) Human Rights Campaign
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ben Dillon	7	Amount of contributions (\$)
	10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-5127		500.00
8	Principal occupation / Job title (See Instructions) Vice President, Government Relations		9	Employer (See Instructions) Noble Energy
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	Patty Ellis ----- 6 Contributor address;                      City;                      State;                      Zip Code Newtown                      PA 18940-9686	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas L. Knabel ----- 6 Contributor address;                      City;                      State;                      Zip Code Minneapolis                      MN 55403-1000	7	Amount of contributions (\$)  500.00
8 Principal occupation / Job title (See Instructions) Physician Executive		9 Employer (See Instructions) United Health Group	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Albert Garcia ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77002-8673	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cathi C. Scalise ----- 6 Contributor address;                      City;                      State;                      Zip Code Dallas                      TX 75219-5224	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Michael S. Berman ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	6 Contributor address; City; State; Zip Code Washington DC 20007-3910		1000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Duberstein Group	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James W. Harrison	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Dallas TX 75219-4406		500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Realpage, Inc.	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Julie Elizabeth Johnson	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Dallas TX 75230-4032		500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Van Wey Johnson Assoc	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christopher L. Flynn	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Boston MA 02118-1507		500.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) IBM	

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Todd A. Canon	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Austin TX 78703-5130		250.00

8 Principal occupation / Job title (See Instructions) Family Physician	9 Employer (See Instructions) South Austin Medical Clinic
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ky L. Fiser	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Dallas TX 75209-1703		1000.00

8 Principal occupation / Job title (See Instructions) Private Wealth Manager, Certified Financial Planner	9 Employer (See Instructions) Williams Financial
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joan Lau	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Philadelphia PA 19118-3806		100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Scott W Bishop	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Charlotte NC 28204-2109		100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	John K. Barry ----- 6 Contributor address;                      City;                      State;                      Zip Code Chicago                      IL 60660-1825	7	Amount of contributions (\$)  250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mike C. Holloman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77005-1620	7	Amount of contributions (\$)  5000.00
8 Principal occupation / Job title (See Instructions) Business Broker		9 Employer (See Instructions) Murphy Business	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Randy D. Pierson ----- 6 Contributor address;                      City;                      State;                      Zip Code Dallas                      TX 75204-1703	7	Amount of contributions (\$)  500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robin Brown ----- 6 Contributor address;                      City;                      State;                      Zip Code Livingston                      TX 77351-0906	7	Amount of contributions (\$)  500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Linda M. Scaparotti	7	Amount of contributions (\$)  500.00

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total Pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission filers)
10/7/2015	6 Contributor address; Berkeley	City; Berkeley	State; Zip Code CA 94705
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 10/7/2015	5 Full name of contributor Christopher Lindsey	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100.00
	6 Contributor address; Dallas	City; Dallas	State; Zip Code TX 75219
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 10/7/2015	5 Full name of contributor Elaine Decanio	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 1000.00
	6 Contributor address; Houston	City; Houston	State; Zip Code TX 77063-1003
8 Principal occupation / Job title (See Instructions) Change Manager		9 Employer (See Instructions) Shell Oil	
4 Date 10/7/2015	5 Full name of contributor John Rohde	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 500.00
	6 Contributor address; Spring	City; Spring	State; Zip Code TX 77388-6084
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Worley Parsons	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

**2 FILER NAME** 3 Filer ID (Ethics Commission filers)

<b>4</b> Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	<b>7</b>	Amount of contributions (\$)
10/7/2015	April L. Ayers		
6 Contributor address; City; State; Zip Code			
Houston TX 77006-1042		250.00	

<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)

<b>4</b> Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	<b>7</b>	Amount of contributions (\$)
10/7/2015	Vanessa Benavides		
6 Contributor address; City; State; Zip Code			
Dallas TX 75219-4136		1000.00	

<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Attorney	Tenet Healthcare

<b>4</b> Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	<b>7</b>	Amount of contributions (\$)
10/7/2015	Richard Werner		
6 Contributor address; City; State; Zip Code			
Houston TX 77019-1411		1000.00	

<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Retired	Retired

<b>4</b> Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	<b>7</b>	Amount of contributions (\$)
10/7/2015	Christopher James Carolan		
6 Contributor address; City; State; Zip Code			
Brooklyn NY 11217-3387		250.00	

<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Attorney	Seyfarth Shaw

<b>4</b> Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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10/7/2015	Andrew Sendall ----- 6 Contributor address;                      City;                      State;                      Zip Code New York                      NY 10032-7343	7 Amount of contributions (\$)  100.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ian Barrett ----- 6 Contributor address;                      City;                      State;                      Zip Code League City                      TX 77573-4566	7 Amount of contributions (\$)  250.00
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8 Principal occupation / Job title (See Instructions) HR Executive	9 Employer (See Instructions) UT Medical
---	---

10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard Dean Dickson ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77007-3537	7 Amount of contributions (\$)  500.00
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8 Principal occupation / Job title (See Instructions) VP of Investments	9 Employer (See Instructions) Galgne Financial
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10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christian Rogers ----- 6 Contributor address;                      City;                      State;                      Zip Code New Orleans                      LA 70130-8600	7 Amount of contributions (\$)  100.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rey Ocanas	7 Amount of contributions (\$)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-7144		750.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) BBVA Compass	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Meghan Jane Stabler	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Round Rock TX 78664-6143		250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Faye Wilson Tate	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Denver CO 80238-3330		200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jason Holmes Laney	7	Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Washington DC 20009-5857		250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gregory Snow		7 Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Medford MA 2155		100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bob Valentine		7 Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77098-2027		2000
8 Principal occupation / Job title (See Instructions) Business Manager		9 Employer (See Instructions) LyondellBasell	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lacey All		7 Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Seattle WA 98112-3508		100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Clayton Katz		7 Amount of contributions (\$)
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-1441		100
8 Principal occupation / Job title (See Instructions) Realestate Broker		9 Employer (See Instructions) Move Properties	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	Clayton Katz ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007-1441	7	Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions) Realestate Broker		9 Employer (See Instructions) Move Properties	
10/7/2015	Paul Boskind ----- 6 Contributor address;                      City;                      State;                      Zip Code San Antonio TX 78205-2763	7	Amount of contributions (\$)  25000
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Deer Oaks	
10/7/2015	Gerardo Guerrero ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-3815	7	Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	Scott Tranweaver ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77030-1103	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	Ryan C. Wilson ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/7/2015	6 Contributor address; City; State; Zip Code Columbia SC 29205-1741		100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ted Voloyiannis 6 Contributor address; City; State; Zip Code Houston TX 77098-1164		7 Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Memorial Hermann Medical	
10/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dolores Covrigaru 6 Contributor address; City; State; Zip Code Albertson NY 11507		7 Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/8/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gregory Landry 6 Contributor address; City; State; Zip Code Houston TX 77019-2603		7 Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

**2 FILER NAME** 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sue West	7	Amount of contributions (\$)
10/8/2015	6 Contributor address; City; State; Zip Code Downingtown PA 19335		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Jay	7	Amount of contributions (\$)
10/9/2015	6 Contributor address; City; State; Zip Code Santa Rosa CA 95405-8073		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Valerie Ploumpis	7	Amount of contributions (\$)
10/10/2015	6 Contributor address; City; State; Zip Code Los Angeles CA 90019-1725		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Conely	7	Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77219-1053		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Mcon Management	
--	--	--	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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	Legacy Michael	7 Amount of contributions (\$)
10/19/2015	6 Contributor address; City; State; Zip Code Dallas TX 75229-6212	200

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Todd A. Canon	7 Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Austin TX 78703-5130	250

8 Principal occupation / Job title (See Instructions) Family Physician	9 Employer (See Instructions) South Austin Medical Clinic
---	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Edward A. Finger	7 Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-4082	10000

8 Principal occupation / Job title (See Instructions) Teacher	9 Employer (See Instructions) The Briarwood School
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Johnnie A. Lee	7 Amount of contributions (\$)
10/22/2015	6 Contributor address; City; State; Zip Code Bridgewater NJ 08807-0802	250

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements



**MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION**

**SCHEDULE C1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule C1:
2 FILER NAME		3	Filer ID (Ethics Commission filers)
4	Date  10/20/2015	5 Corporation/Labor Organization name Human Rights Campaign  ----- 6 Corporation/Labor Organization address; City; State Zip Code Washington DC 20036	7 Amount of contribution (\$)  80000.00
4	Date  10/23/2015	5 Corporation/Labor Organization name Tie The Knot  ----- 6 Corporation/Labor Organization address; City; State Zip Code Los Angeles CA 90025-1757	7 Amount of contribution (\$)  20000.00
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

**NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION**

**SCHEDULE C2**

The Instruction Guide explains how to complete this form.				1	Total Pages Schedule C2:
2 FILER NAME				3	Filer ID (Ethics Commission filers)
4	Date	5 Corporation/Labor Organization name	6 Corporation/Labor Organization address; City; State Zip Code	7	Amount of contribution (\$)      8. In-kind contribution description (if applicable)
	10/24/2015	Human Rights Campaign	Washington DC 20036		9357.28      Staff Time
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T
4	Date	5 Corporation/Labor Organization name	6 Corporation/Labor Organization address; City; State Zip Code	7	Amount of contribution (\$)      8. In-kind contribution description (if applicable)
	10/24/2015	Human Rights Campaign	Washington DC 20036		585.70      Event Expense
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T
4	Date	5 Corporation/Labor Organization name	6 Corporation/Labor Organization address; City; State Zip Code	7	Amount of contribution (\$)      8. In-kind contribution description (if applicable)
	10/24/2015	Human Rights Campaign	Washington DC 20036		650.00      Text and Email
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date  9/25/2015	<b>5</b> Payee name  Texans for All	
<b>6</b> Amount (\$)  5,810.00	<b>7</b> Payee address; City; State; Zip Code  1500 McGowen St Ste 130  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Contribution
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date  10/9/2015	<b>5</b> Payee name  Texans for All	
<b>6</b> Amount (\$)  72,000.00	<b>7</b> Payee address; City; State; Zip Code  1500 McGowen St Ste 130  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Contribution
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date  10/20/2015	<b>5</b> Payee name  Texans for All	
<b>6</b> Amount (\$)  4,174.00	<b>7</b> Payee address; City; State; Zip Code  1500 McGowen St Ste 130  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/20/2015	5 Payee name Texans for All		
6 Amount (\$) 80,000.00	7 Payee address; City; State; Zip Code 1500 McGowen St Ste 130  Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/22/2015	<b>5</b> Payee name Texans for All	
<b>6</b> Amount (\$) 20,000.00	<b>7</b> Payee address; City; State; Zip Code 1500 McGowen St Ste 130  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Contribution
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/23/2015	<b>5</b> Payee name Texans for All	
<b>6</b> Amount (\$) 10,800.00	<b>7</b> Payee address; City; State; Zip Code 1500 McGowen St Ste 130  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Contribution
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**